## INTRODUCTION

## WHO Resolution

Between 1970 and 1995, WHO adopted 14 resolutions on the need for both National and International tobacco control policy. Four of the 14 resolutions are relevant to the Global Youth Tobacco Survey project. WHO member states are encouraged to implement comprehensive tobacco control strategies that includes the following:

- 1) Measures to ensure that non-smokers receive effective protection, to which they are entitled, from involuntary exposure to tobacco smoke.
- 2) Measures to promote abstention from the use of tobacco so as to protect children and young people from becoming addicted.
- 3) Programs of education and public information on tobacco and health issues, including smoking cessation programs, with active involvement of the health professionals and the media.
- 4) Monitoring of trends in smoking and other forms of tobacco use, tobacco-related diseases, and effectiveness of national smoking control action.

## **Public Health Impact and Response**

Tobacco use is one of the chief preventable causes of death in the world. In 1999 WHO estimated that some 4 million deaths a year were attributed to tobacco, a figure expected to rise to 10 million deaths a year by 2030. By that time, 7 million of those deaths will occur in developing countries if recent trends continue. Recent studies carried out by WHO indicate, rising trend in smoking prevalence rates among children and adolescents, and earlier age of initiation. It has been observed by WHO that, most people begin smoking cigarettes before the age of 18. WHO estimates that, if these patterns continue, tobacco use will result in the deaths of 250 million children and adolescents, most of them in developing countries.

In recent years, WHO, UNICEF, G8 Ministers of the Environment, Ministers Responsible for Youth affairs and many National Health Agencies, have called for concerted action against tobacco use by young people. Comprehensive data and information on tobacco use among young people is not available, in most developing countries. To address this data gap, the WHO through the Tobacco Free Initiative Project (TFI) and the US Centers for Disease Control and Prevention Office on Smoking and Health (CDC-OSH) have developed the Global Youth Tobacco Survey (GYTS), in consultation with a number of countries representing the six WHO regions, which form an important part of a global tobacco surveillance system.

## Tobacco Use in Kenya

Commercial farming of tobacco was introduced in Kenya in 1975. Currently over 15,000 small-scale farmers are contracted to grow tobacco in three tobacco growing regions in the country i.e. Meru/Embu, Nyanza and Bungoma. During the last five years tobacco has contributed 45 billion Kenya shillings as tax revenue to the government.

Over 5 billion cigarette sticks are produced annually; most of which are sold locally. Tobacco is grown in areas that can grow cotton and other food crops. With the poor performance of cotton, due to the importation of cheap fabrics, farmers switched to commercial tobacco cultivation. Despite the high contribution in the national revenue in the form of taxes, tobacco farmers have not received any significant improvement in their quality of life.

Tobacco use is significantly prevalent. It is estimated that smoking prevalence among adults ranges between 30% and 60%. Men smoke twice as much as women. The smoking rate increases with age. There are rules, which prohibit smoking in public places, including Public Buildings, however these rules are not effective, since they are not enforced. Under the Public Health ACT, cigarette manufacturers are required to display on the cigarette packets, a warning about the danger of cigarette smoking. The Ministry of Health has also banned smoking in all health institutions throughout the country. Some service providers have also banned smoking on their premises. There is also a growing number of working places, which have declared smoke free zones.

Kenya commemorates the World No Tobacco Day (WNTD) annually since 1992. This has been one of the major events for raising awareness on the harmful health effects caused by tobacco use. The Ministry of Health has also established the National Tobacco Free Initiative Committee (NTFIC), which is spearheading tobacco control activities in the country. Currently, Kenya in collaboration with WHO/TFI, is implementing the project, Protecting Youth from Tobacco. There are many programs under this project, which are aimed at raising awareness among the youth on the harmful health effects caused by tobacco use and encourage abstinence. Kenya is active in participating in the framework convention on Tobacco control.

The Ministry of Health has drafted a tobacco control Bill, which seeks to restrict the sale of tobacco products to minors and control smoking in public places, with a view to protecting non-smokers especially children and adolescents from second-hand smoking also known as environmental tobacco smoke (ETS).